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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number		10/580,636	
	Filing Date		November 24, 2004 (Int'l)	
	First Named Inventor		Neil L. ANDERSON	
	Title		A MODULAR CATHETER	
	Art Unit		3736	
	Examiner Name		Not Yet Assigned	
Attorney Docket No.		559022000300		

I hereby revoke all previous powers of attorney given in the above-identified application.

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☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	4 July 07
Name	NEIL ANDERSON	Telephone	
Title and Company	CATHERX		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

Client Reference No.: 127944